# Citizen Audit.org

#### Form **990**

Department of the Treasury Internal Revenue Service

**Return of Organization Exempt From Income Tax** 

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public.

Open to Public

OMB No 1545-0047

▶ Information about Form 990 and its instructions is at www.irs.gov/form990. A For the 2015 calendar year, or tax year beginning and ending

Inspection

В	Check if applicable	C Name of organization		D	D Employer iden	tification number			
_	Addre	The Church of Jesus Christ		Day					
H	chang Name		Trust	<del></del>	4.5	-6721810			
F	chang		-44	D t t	<del>                                     </del>				
F	return Final	Number and street (or P.O. box if mail is not delivered to	street address)	Room/suite					
<u></u>	return/ termin	5046 North Melvina			T	3-865-9313	120		
_	ated Amend	City or town, state or province, country, and ZIP or f	oreign postal code		G Gross receipts \$		)39.		
F	return Applic	CIIICado, IL 00030	3 TI - 1	<del></del>	H(a) Is this a grou		<b>7.</b> .		
ـــا	⊥_ltion pendir	F Name and address of principal officer. Delital u			for subordina		_		
		5 5046 North Melvina, Chicago			H(b) Are all subordinat		_'No		
			ert no.) 4947(a)(1) (	or 527	7	h a list. (see instruction	15)		
		e: ► N/A  organization: Corporation X Trust Association	Other -	1. 1/	H(c) Group exemp		J., TT		
	art I	organization X Trust Association Summary	I Other	<u>L Year</u>	of formation, 2010	M State of legal domici	ile: TT		
ب	<del></del>	<del></del>			IDC mambas				
õ	1	Briefly describe the organization's mission or most signific					1		
the trust's geographic area with educational, medical and social Check this box Inf the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) Total number of individuals employed in calendar year 2015 (Part V, line 2a) Total number of volunteers (estimate if necessary) Total unrelated business revenue from Part VIII, column (C), line 12									
ē	2	Check this box I if the organization discontinued		sed of more	e than 25% of its ne	1	_		
é	3	Number of voting members of the governing body (Part VI			-	3	6		
ď	4	Number of independent voting members of the governing	• • • • • •		r	4	6		
ies	5	Total number of individuals employed in calendar year 201	5 (Part V, line 2a)		<u> </u>	5	0		
ž	6	Total number of volunteers (estimate if necessary)				6	0		
Ą	7 a	Total unrelated business revenue from Part VIII, column (C	•		T		228.		
	b	Net unrelated business taxable income from Form 990-T, I	ine 34			7b	<u> </u>		
				<u> </u>	Prior Year	Current Year			
Revenue	8	Contributions and grants (Part VIII, line 1h)		<u> </u>		)	0.		
	9	Program service revenue (Part VIII, line 2g)				0.	<u>0.</u>		
ě	10	Investment income (Part VIII, column (A), lines 3, 4, and 7c	d)		62112	388	375.		
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10	c, and 11e)	<u> </u>	· · · · · · · · · · · · · · · · · · ·	). <u> </u>	0.		
	12	Total revenue - add lines 8 through 11 (must equal Part VII	I, column (A), line 12)		62112		375.		
	13	Grants and similar amounts paid (Part IX, column (A), lines	1.3)		60445	5. 479	28.		
	14	Benefits paid to or for members (Part IX, column (A), line 4	) .	L.	(	).	0.		
ŝ	15	Salaries, other compensation, employee benefits (Part IX,	column (A), lines 5-10)		(	).	0.		
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)	)		(	).	0.		
ĝ	b	Total fundraising expenses (Part IX, column (D), line 25)	<b>&gt;</b>	0.					
Ŵ	17	Other expenses (Part IX, column (A), lines 11a-11d, 1f-24	DECENTED		8194	1. 81	24.		
	18	Total expenses Add lines 13-17 (must equal Part IX colu	m (A) me 25) V C D	, . ] [	68639	560	52.		
	19	Revenue less expenses Subtract line 18 from line 12 LD		18	-6527	7171	.77.		
50	3)	$\phi$	MAY 24 2016	19 Be	ginning of Current Ye	ar End of Year			
sets	20	Fotal assets (Part X, line 16)		IST	1133668				
Aga	21	Total liabilities (Part X, line 26)	JODEM HT	[	C	).	0.		
Net Assets C	22_	Net assets or fund balances Subtract line 21 from line 20	JGDEN UT		1133668	10956	547.		
P	art II	Signature Block							
Und	der pena	ties of perjury, I declare that I have examined this return, including	g accompanying schedule:	s and statem	ents, and to the best o	f my knowledge and belie	f, it is		
true	e, correc	t, and complete. Declaration of preparer (other than officer) is basi	ed on all information of wh	nich preparer	has any knowledge.				
Sig	ın	Signature of officer	120	$\overline{}$	Date	٠.١.١			
He		Bernard Fish, Chairman	6 h	<b>3</b>		5/16/16			
		Type or print name and title							
		Print/Type preparer's name Prepare	r's signature	[[	Date Check	PTIN			
Pai	ď		• •		rf self-em	ployed			
	parer	Firm's name			Firm's EIN	<del></del>			
	Only	Firm's address				<del></del>			
	•				Phone no.				
Ma	v the IF	S discuss this return with the preparer shown above? (see	e instructions)		11 110110 1101	Yes	No		
	001 12-1			ons.		Form <b>990</b>			

2015.03030 The Church of Jesus Christ

LDS 1

The Church of Jesus Christ of Latter-Day

3390516 706832 LDS

Part IV Checklist of Required Schedules

	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2		X
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			l l
	public office? If "Yes," complete Schedule C, Part I	_3_		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect		Ì '	Ì
	during the tax year? If "Yes," complete Schedule C, Part II	4_	ļ	X
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		٠,,
_	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	_5_	ļ	X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
_	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		_X_
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		x
٥	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II  Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
8	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for		<u> </u>	
٠	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		х
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X			
	as applicable.		ĺ	
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		]	
	Part VI	11a		X
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
ď	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			,,
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		X
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	446		х
400	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	11f		A_
124	Schedule D, Parts XI and XII	12a		х
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	12.0		
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		_X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	-	X
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			v
	complete Schedule G, Part III	_19	990	X (2015)

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Part IV | Checklist of Required Schedules (continued)

	1		Yes	_No_
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	X	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	X	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	i		
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		<u> </u>
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990 EZ? If "Yes," complete	İ		
	Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		_X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		_X
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		<u>X</u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		_X_
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		_X_
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		_X_
þ	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?		ļ	
	If "Yes," complete Schedule R, Part V, line 2	36		<u>X</u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization		İ	
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u>_X</u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form	990 (	2015\

	Check if Schedule O contains a response or note to any line in this Part V							
			Yes	No				
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable							
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1b 0		İ					
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming							
	(gambling) winnings to prize winners?	1c						
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,							
	filed for the calendar year ending with or within the year covered by this return 2a 0							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b						
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)							
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3а		X				
b If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O								
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a								
financial account in a foreign country (such as a bank account, securities account, or other financial account)?								
b	If "Yes," enter the name of the foreign country:	4a_		X				
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)							
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х				
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х				
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c						
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit							
- Cu	any contributions that were not tax deductible as charitable contributions?	6a		Х				
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts							
~	were not tax deductible?	6b						
7	Organizations that may receive deductible contributions under section 170(c).	- 00						
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X				
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b						
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	70_						
·	to file Form 8282?	7c		X				
а	If "Yes," indicate the number of Forms 8282 filed during the year							
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e						
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f						
, g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g						
•	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h						
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the							
_	sponsoring organization have excess business holdings at any time during the year?	8	i i					
9	Sponsoring organizations maintaining donor advised funds.							
	Did the sponsoring organization make any taxable distributions under section 4966?	9a						
h	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b						
10	Section 501(c)(7) organizations. Enter.							
	Initiation fees and capital contributions included on Part VIII, line 12							
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities							
11	Section 501(c)(12) organizations. Enter:							
	Gross income from members or shareholders							
	Gross income from other sources (Do not net amounts due or paid to other sources against		. {					
_	amounts due or received from them.)							
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a						
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		` <u>`</u>					
	Is the organization licensed to issue qualified health plans in more than one state?	13a						
_	Note. See the instructions for additional information the organization must report on Schedule O							
b	Enter the amount of reserves the organization is required to maintain by the states in which the							
_	organization is licensed to issue qualified health plans			i L				
С	Enter the amount of reserves on hand		]					
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X				
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		<del></del> -				

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Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI					<u>LX</u>			
<u>Sec</u>	tion`A. Governing Body and Management								
		1	I		Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax year	<u>1a</u>		6	1	ļ			
	If there are material differences in voting rights among members of the governing body, or if the governing			İ					
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			_	1				
b	Enter the number of voting members included in line 1a, above, who are independent	_1b_	<u> </u>	<u>6</u>					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationsh	lip with	any other	1	1				
	officer, director, trustee, or key employee?			2		_X_			
3	Did the organization delegate control over management duties customarily performed by or under the	he dire	ct supervision	1	Ì	Ì			
	of officers, directors, or trustees, or key employees to a management company or other person?			3	<del> </del>	X_			
4	Did the organization make any significant changes to its governing documents since the prior Form		as filed?	5	┼	X			
5 Did the organization become aware during the year of a significant diversion of the organization's assets?									
	6 Did the organization have members or stockholders?								
7a	Did the organization have members, stockholders, or other persons who had the power to elect or a	appoint	one or	Į					
	more members of the governing body?			7a	-	X			
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,	stockh	olders, or						
	persons other than the governing body?			7b	<del> </del>	X			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ear by th	ie following:			ļ			
	The governing body?			<u>8a</u>	X				
þ	Each committee with authority to act on behalf of the governing body?			8b	-	X			
9	9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the								
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			9		_X_			
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal F	Revenu	e Code )		<del></del> -	γ			
					Yes	No			
	Did the organization have local chapters, branches, or affiliates?			102	<del>-</del>	X			
þ	If "Yes," did the organization have written policies and procedures governing the activities of such of	chapter	s, affiliates,	}		:			
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10t					
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?								
	b Describe in Schedule O the process, if any, used by the organization to review this Form 990.								
	2a Did the organization have a written conflict of interest policy? If "No," go to line 13								
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give ris			_12b	<del>'  </del>				
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If	Yes," d	escribe	1	İ				
	ın Schedule O how this was done			120	<del>:  </del> -	<del>  ,,-</del>			
13	Did the organization have a written whistleblower policy?			13	<del> </del>	X			
14	Did the organization have a written document retention and destruction policy?			14	╂	X			
15	Did the process for determining compensation of the following persons include a review and approve	•	naependent						
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision	?		Į					
	The organization's CEO, Executive Director, or top management official			15a		X			
þ	Other officers or key employees of the organization			15b	4	X			
40	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).								
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrange	ement v	vitn a	1		3.7			
	taxable entity during the year?			16a	<del>                                     </del>	X			
D	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate the second state of	•	•		1				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization of the supplicable federal tax law, and take steps to safeguard the organization of the supplicable federal tax law, and take steps to safeguard the organization of the supplicable federal tax law, and take steps to safeguard the organization of the supplicable federal tax law, and take steps to safeguard the organization of the supplicable federal tax law, and take steps to safeguard the organization of the supplicable federal tax law, and take steps to safeguard the organization of the supplicable federal tax law, and take steps to safeguard the organization of the supplicable federal tax law, and take steps to safeguard the organization of the supplicable federal tax law, and take steps to safeguard the organization of the supplicable federal tax law, and take steps to safeguard the organization of the supplicable federal tax law, and take steps to safeguard the supplicable federal tax law, and take steps to safeguard the supplicable federal tax law, and tax	anizatio	ns	401	-				
	exempt status with respect to such arrangements? tion C. Disclosure			16b	Ч	I			
17 10	List the states with which a copy of this Form 990 is required to be filed ► IL  Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-	T (8004	ion 501/0/2\n onli	) availe	ble				
18		i (Sect	ion so r(c)(s)s only	avalla	אום				
	for public inspection. Indicate how you made these available. Check all that apply.  Own website  Another's website  X Upon request  Other (explain	n in Cal	hodula (1)						
40				nd 6	nousi				
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, co	וווווווווווווווווווווווווווווווווווווו	n interest policy, a	iu iina	ncial				
200	statements available to the public during the tax year.	_ al	.al						
20	State the name, address, and telephone number of the person who possesses the organization's be	ooks ar	iu recoras: -						
	Bernard A Fish - 773-865-9313  5046 North Molying Chicago II 60630		<del></del>						
	5046 North Melvina, Chicago, IL 60630								

532006 12-16-15

Form **990** (2015)

45-6721810

#### Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response or note to any line in this Part VII

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization. more than \$10,000 of reportable compensation from the organization and any related organizations.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

List persons in the following order, individual trustees or directors; institutional trustees; officers, key employees; highest compensated employees; and former such persons.

(A) Name and Title	(B) Average hours per week	box	Position (do not check more than one box, unless person is both an officer and a director/trustee)		(D) (E)  Reportable Reportable compensation from from related		(F) Estimated amount of other			
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Bernard A Fish	1.00	X	_					0.	0.	0.
Chairman	0.50	-	<del> </del>		-	<del>                                     </del>	-			<u> </u>
(2) Joseph P Bennett  Committee Member	0.30	X						0.	0.	0.
(3) Michael P Schulz	0.50	<u> </u>	-				_			
Committee Member	3,30	x						0.	0.	0.
(4) Kristin Kutter	0.50		<del>                                     </del>			┢				
Committee Member	- 0150	X						0.	0.	0.
(5) Deborah A Ostvig	0.50				-					
Committee Member		X						0.	0.	0.
(6) Tirza, Alverado-Villagomez	0.50				·		_			
Committee Member		$\mathbf{x}$						0.	0.	0.
			_			_			 	
						<del> </del>				
<del></del>	<del></del>				_	Ь				

532007 12-16-15

Form 990 (2015)

orm	1990 (2015) Saints,								or naccer-pa Trust	.y 45-67	721:	81 N	F	age 8
	rt VII Section A. Officers, Directors, Tru					_		_			<u> 21                                   </u>	<u> </u>		ugo u
	, (A) Name and title	(B) Average hours per week	(do box offi	not c	Pos Pos heck ss pe	C) stion more rson		one h an	(D) Reportable compensation from	(E) Reportable compensation from related	- 1	an	(F) stimate nount other	of
	<del></del>	hours for				the organization (W-2/1099-MISC)	organizations (W-2/1099-MIS		fr org and	ipensa rom th ianizat d relat anizat	ne tion ted			
											- 1			
														-
				-										
														•
				_	_									
				_							-			
						ļ								
					ì									
	Sub-total  Total from continuation sheets to Part V	II, Section A		<u>'-</u>				<b>&gt;</b>	0.		0.			0.
<u>d</u> 2	Total (add lines 1b and 1c)  Total number of individuals (including but	not limited to th	ose	liste	ed al	bove	e) wł	no re	0. eceived more than \$100	0,000 of reportable	0. e	-		0.
	compensation from the organization									<u> </u>		-		0
3	Did the organization list any former officer	director or tri	ister	- ke	v er	nolo	vee	or:	highest compensated e	mplovee on	٦		Yes	No
•	line 1a? If "Yes," complete Schedule J for	•		J, 110	, 0,		,,	<b>V</b>	ngnost compensated c			3		Х
4	For any individual listed on line 1a, is the s									the organization				
5	and related organizations greater than \$15 Did any person listed on line 1a receive or									idual for services	}	4		X
	rendered to the organization? If "Yes," con	-				-						5		X
	tion B. Independent Contractors								<del> </del>	<b>A100.000</b>			<del></del> _	
1	Complete this table for your five highest countries the organization. Report compensation for										pensa	auon 1	rom	
	(A)								(B)			(0		
	Name and business	address	NC	ONE	<u> </u>			+	Description of s	services		ompe	nsatio	n 
			_			<u>.</u>		_						
								-						
							_	+						
		<u></u>						$\downarrow$	<del> </del>			_		
2	Total number of independent contractors (	including but n	ot lir	nite	d to	tho	se lis	ted	l above) who received n	nore than				

Form **990** (2015)

\$100,000 of compensation from the organization

		(2015) Saint		<u>igo First</u>	<u>Ward Trus</u>	<u>t</u>	<u>45-6721</u>	810 Page <b>9</b>
Pa	rt VII							
		Check if Schedule O conf	tains a response	or note to any lin	e in this Part VIII (A)	(B)	(C)	(5)
	,				Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
ats ts	1 a	Federated campaigns	, 1a				<del></del>	
ğä	Ь	Membership dues	1b					
Ą,G	С	Fundraising events	1c					
凯	d		1d			ĺ		
S,E	е							
ĒΩ	f	411 11 1 1 1 1						
흁	ļ	similar amounts not included abo	· I I			Į į		
ξĠ	g	Noncash contributions included in lines						
Contributions, Gifts, Grants and Other Similar Amounts	_	Total. Add lines 1a-1f		<b>&gt;</b>				
				Business Code				
ġ.	2 a					ļ		
<u>، ک</u>	ь							
ž &	c							
eve eve	ď							
Program Service Revenue	e							
<u> </u>	f	All other program service reve	enue					
	a	Total. Add lines 2a-2f		<b></b>				
	3	Investment income (including	dividends, intere	est, and				
		other similar amounts)	•	<b>&gt;</b>	34228.		34228.	
	4	Income from investment of ta	x-exempt bond p	oroceeds ►				
	5	Royalties		▶ [				
		•	(i) Real	(ii) Personal				
	6 a	Gross rents						
	b	Less: rental expenses						
	С							
	d	Net rental income or (loss)		<b>&gt;</b>				
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	14811.					
	ь	Less: cost or other basis						
		and sales expenses	10164.					
	c	Gain or (loss)	4647.			1		
		Net gain or (loss)		<b>&gt;</b>	4647.	4647.		
•	1	Gross income from fundraisin	g events (not					
Ĭ		including \$	-	[		!		
eve		contributions reported on line		Ì		}		
Ē		Part IV, line 18	a	į l				
Other Revenue	ь	Less: direct expenses	b					
0	c	Net income or (loss) from fund	draising events	<b></b>				
	9 a	Gross income from gaming ac	ctivities. See					
		Part IV, line 19	a					
	b	Less: direct expenses	b					
	С	Net income or (loss) from gam	ning activities	<b>•</b>				<u></u>
	10 a	Gross sales of inventory, less	returns					
	İ	and allowances	. a					
	b	Less: cost of goods sold	b					
	С	Net income or (loss) from sale	s of inventory	<b></b> ▶				<u>-</u>
		Miscellaneous Revenu		Business Code				
	11 a						· · · · · · · · · · · · · · · · · · ·	
	b							
	С							
	d	All other revenue						
	е	Total. Add lines 11a-11d		<b>&gt;</b>				
	12	Total revenue. See instructions.		▶	38875.	4647.	34228.	0.

Sect	ion 501(c)(3) and 501(c)(4) organizations must com	plete all columns. All oth	er organizations must co	omplete column (A)	
	Check if Schedule O contains a respon	nse or note to any line in	this Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	42000.	42000.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	5928.	5928.		
3	Grants and other assistance to foreign				-
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include				
-	section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes		<del></del>		
11	Fees for services (non-employees).				
а	Management	7759.	7759.		
b	Legal				
С	Accounting				
d	Lobbying [				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A) amount, list line 11g expenses on Sch O.)	365.		365.	
12	Advertising and promotion				
13	Office expenses				
14	Information technology			<del></del>	
15	Royalties			<del></del>	
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				<del></del>
21	Payments to affiliates			- <del></del>	
22	Depreciation, depletion, and amortization				
23	Other expenses, Itamize expenses not equared				
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а					
b					<del></del>
C					
d					
-	All other expenses	56050		2.5	
	Total functional expenses. Add lines 1 through 24e	56052.	55687.	365.	0.
26	Joint costs. Complete this line only if the organization	1	}	į	
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.  Check here in 1 following SOP 98-2 (ASC 958-720)	ļ			
	11 following SOP 98-2 (ASC 958-720)	1	· ·	,	

532010 12-16-15

Form 990 (2015)
Part X Balance Sheet

Pa	rt X	Balance Sheet				
_		Check if Schedule O contains a response or no	te to any line in this Part X			
	,			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing		41446.	1	34433.
	2	Savings and temporary cash investments			2	
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net			4	
	5	Loans and other receivables from current and for	ormer officers, directors,			
		trustees, key employees, and highest compens	ated employees Complete			
		Part II of Schedule L	<u> </u>		5	
	6	Loans and other receivables from other disquali				
		section 4958(f)(1)), persons described in section				
		employers and sponsoring organizations of sec				
şt		employees' beneficiary organizations (see instr)	Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net			7	
⋖	8	Inventories for sale or use	Ĺ		8	
	9	Prepaid expenses and deferred charges			9	
	10a	Land, buildings, and equipment: cost or other	[ ]			
		basis. Complete Part VI of Schedule D	10a			
	b	Less. accumulated depreciation	10b		10c	<del></del>
	11	Investments - publicly traded securities	<u> </u>	1092222.	11	1061214.
	12	Investments - other securities. See Part IV, line	F	<del></del>	12	
	13	Investments - program-related. See Part IV, line	11		_13	
	14	Intangible assets	<u> </u>		14	
	15	Other assets. See Part IV, line 11	<u> </u>	4400660	15	1005645
	16	Total assets. Add lines 1 through 15 (must equ	al line 34)	1133668.	16	1095647.
	17	Accounts payable and accrued expenses	-		17	
	18	Grants payable	·		18	
	19	Deferred revenue	•		19	<del></del>
	20	Tax-exempt bond liabilities	Deat N/ of Calcadada D		20	
	21	Escrow or custodial account liability. Complete	F		21	
Liabilities	22	Loans and other payables to current and former	1			
E		key employees, highest compensated employee	es, and disquained persons		00	
E:	00	Complete Part II of Schedule L Secured mortgages and notes payable to unrela	· · ·		22	
	23		` <u> </u>		23	<del></del>
	24 25	Unsecured notes and loans payable to unrelate Other liabilities (including federal income tax, pa			24	
i	20	parties, and other liabilities not included on lines	•			
		Schedule D	17-24). Complete Falt X of		25	
	26	Total liabilities. Add lines 17 through 25	ř	0.	26	0.
		Organizations that follow SFAS 117 (ASC 958	3), check here			<del></del>
တ		complete lines 27 through 29, and lines 33 ar	i i		1	
JCe	27	Unrestricted net assets			27	
alar	28	Temporarily restricted net assets	·		28	
d B	29	Permanently restricted net assets			29	
Š		Organizations that do not follow SFAS 117 (A	SC 958), check here ►X			
P.		and complete lines 30 through 34.				
Net Assets or Fund Balances	30	Capital stock or trust principal, or current funds	1	1133668.	30	1095647.
SSE	31	Paid-in or capital surplus, or land, building, or ed	upment fund	0.	31	0.
at A	32	Retained earnings, endowment, accumulated in	F	0.	32	0.
ž	33	Total net assets or fund balances		1133668.	33	1095647.
	34	Total liabilities and net assets/fund balances		1133668.	34	1095647.
						Form <b>990</b> (2015)

Both consolidated and separate basis

If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis,

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit,

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

Consolidated basis

review, or compilation of its financial statements and selection of an independent accountant?

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Form **990** (2015)

Х

2c

За

consolidated basis, or both:

Separate basis

Act and OMB Circular A-133?

#### **SCHEDULE A**

Department of the Treasury

Internal Reverlue Service

(Form 990 or 990-EZ)

#### **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

➤ Attach to Form 990 or Form 990-EZ.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.lrs.gov/form990.

OMB No 1545-0047

pen to Public Inspection

Name of the organization The Church of Jesus Christ of Latter-Day Employer identification number Saints, Chicago First Ward Trust 45-6721810 Reason for Public Charity Status (All organizations must complete this part ) See instructions. The organization is not a private foundation because it is: (For lines 1 through 11, check only one box) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ)) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 3 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi), (Complete Part II.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2), (Complete Part III ) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) is the organization (i) Name of supported (II) EIN (III) Type of organization (v) Amount of monetary (vi) Amount of listed in your organization (described on lines 1.9) support (see other support (see governing document? above (see instructions)) instructions) instructions)

LHA For Paperwork Reduction Act Notice, see the Instructions for

Schedule A (Form 990 or 990-EZ) 2015

Schedule A (Form 990 or 990-EZ) 2015 Saints, Chicago First Ward Trust 45-6721810 Page 2

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						<del></del>
Cale	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to	ł					
	or expended on its behalf						
3	The value of services or facilities				*		
Ŭ	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3					<u> </u>	
	The portion of total contributions				<del></del>		
5	by each person (other than a						•
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the			İ			
	amount shown on line 11,						
	column (f)						
	Public support. Subtract line 5 from line 4						0.
	ction B. Total Support					4 1 0045	
	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
-	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties	22255	20000	05105	E000E		140740
	and income from similar sources	33357.	30002.	27105.	59285.		149749.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						1 10 5 10
	Total support. Add lines 7 through 10					1	149749.
	Gross receipts from related activities,					12	<del></del>
13	First five years. If the Form 990 is for	-	first, second, third	, fourth, or fifth tax	year as a section	n 501(c)(3)	. —
201	organization, check this box and stop ction C. Computation of Publi	here	roontogo				▶∟_
							00 %
	Public support percentage for 2015 (I		•	olumn (t))		14	.00 %
	Public support percentage from 2014			1 4011 4	4 - 00 4/00/	15	<u>%</u>
16a	33 1/3% support test - 2015. If the o	•		line 13, and line 14	4 is 33 1/3% or n	nore, check this be	ox and
	stop here. The organization qualifies			40 40	15 00 1/00/		<b></b>
D	33 1/3% support test - 2014. If the o				ine 15 is 33 1/3%	or more, check t	nis box
	and stop here. The organization quali				40 40 40		<b>P</b>
1/a	10% -facts-and-circumstances test						
	and if the organization meets the "fac-			•	•	τ vi how the orga	nization
	meets the "facts-and-circumstances"	-	•	• • • •	-		. ▶ 📖
þ	10% -facts-and-circumstances test	_					
	more, and if the organization meets th				· ·		•
	organization meets the "facts-and-circ		•	•	• • • •		
18	Private foundation. If the organization	n did not check a t	oox on line 13, 16a	, 16b, 17a, or 17b,			
					Scho	CUIA A IFORM GOL	) or 990JE7\ 2015

532022

### Schedule A (Form 990 or 990-EZ) 2015 Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II	If the organization fails to
qualify under the tests listed below, please complete Part II \	

	qualify under the tests listed be	low, please comp	olete Part II )			<del></del>	<del></del>
Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) ►	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1	Gifts, grants, contributions, and	_					
	membership fees received (Do not						
	include any "unusual grants.")				(		
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that				İ		
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities						
-	furnished by a governmental unit to	1			1		
	the organization without charge				1		
e	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and			· · · · · · · · · · · · · · · · · · ·	<del> </del>		-
16	3 received from disqualified persons				1		
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
(	Add lines 7a and 7b					7	
8	Public support. (Subtract line 7c from line 6)	-					
	ction B. Total Support				<del></del>		
_	ndar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
	Amounts from line 6	(0) = 0 + 1	(0) 2012	(0) 2010	(4) 2014	(0) 2010	(1) 10141
	dividends, payments received on securities loans, rents, royalties and income from similar sources						
t	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
c	: Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
13	Total support. (Add lines 9, 10c, 11, and 12)					1	
14	First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth ta	ax year as a section	on 501(c)(3) organiz	ation,
	check this box and stop here						▶□
Sec	ction C. Computation of Publi	c Support Per	rcentage				
15	Public support percentage for 2015 (III	ne 8, column (f) d	ivided by line 13, o	column (f))		15	%
	Public support percentage from 2014		=	<b>,</b>	•	16	%
	ction D. Computation of Inves						·· ·
	Investment income percentage for 20			ne 13. column (f\)	<del></del> -	17	%
	Investment income percentage from 2			.5 .5, 55.5 (1))		18	<u> </u>
	33 1/3% support tests - 2015. If the		· ·	nn line 14 and line	15 is more than		
176	more than 33 1/3%, check this box an	_					. 13 1100
			-	•	• •		<b>▶</b>
Ľ	33 1/3% support tests - 2014. If the						and
20	line 18 is not more than 33 1/3%, chec						<b>P</b>
20	Private foundation. If the organization	i did not check a	pox on line 14, 19	a, or 19b, check th	nis box and see in	structions	<b>▶</b> i i

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#### Part IV Supporting Organizations

(Complete only if you checked a box in line 11 on Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A. D. and E. If you checked 11d of Part I, complete Sections A and D. and complete Part V.)

	Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V)			
Sec	tion A. All Supporting Organizations			
			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing			
	documents? If "No" describe in Part VI how the supported organizations are designated. If designated by			
	class or purpose, describe the designation. If historic and continuing relationship, explain	1_1_		
2	Did the organization have any supported organization that does not have an IRS determination of status			
	under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported			
	organization was described in section 509(a)(1) or (2)	2		<u> </u>
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer	[		
	(b) and (c) below.	3a_	<u> </u>	
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and			
	satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the	ļ.		ļ
	organization made the determination	3b	<u> </u>	
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B)			
	purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If	1		ŀ
	"Yes," and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a	ļ	
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign		1	}
	supported organization? If "Yes," describe in Part VI how the organization had such control and discretion			
	despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination	1	Ì	1
	under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used		ļ	
	to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B)	l		
	purposes.	4c	<u> </u>	
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes,"			
	answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN	l		
	numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action,			
	(III) the authority under the organization's organizing document authorizing such action, and (iv) how the action			
	was accomplished (such as by amendment to the organizing document).	5a_	ļ	
b	Type I or Type II only. Was any added or substituted supported organization part of a class already			
	designated in the organization's organizing document?	5b_	ļ	
C	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c	<u> </u>	<u> </u>
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to			
	anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class			
	benefited by one or more of its supported organizations, or (iii) other supporting organizations that also	İ		
	support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in			
	Part VI.	6	ļ	Ļ
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor			
	(defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with	l		
	regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7	<del> </del> -	
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?		ł	
	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8	ļ	
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more		1	ĺ
	disqualified persons as defined in section 4946 (other than foundation managers and organizations described	Í _		
	in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.	9a	-	
þ	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which			
	the supporting organization had an interest? If "Yes," provide detail in Part VI.	9b_	-	
C	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit	_		
	from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section			
	4943(f) (regarding certain Type II supporting organizations, and all Type III non functionally integrated			
	supporting organizations)? If "Yes," answer 10b below	10a	-	
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C. Form 4720, to	ı	1	

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determine whether the organization had excess business holdings

#### The Church of Jesus Christ of Latter-Day

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	t IV Supporting Organizations (continued)		\\\\-	
11	Has the organization accepted a gift or contribution from any of the following persons?	Γ.	Yes	No
	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
-	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
	tion B. Type I Supporting Organizations			
			Yes	N
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported	1		
•	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	•		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization	2		ļ
Sec	tion C. Type II Supporting Organizations	<u>i</u>	٠	
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s).	1	L	
<u>Sec</u>	tion D. All Type III Supporting Organizations		1	1
			Yes	N
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the	1		
_	organization's governing documents in effect on the date of notification, to the extent not previously provided?			-
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
2	By reason of the relationship described in (2), did the organization's supported organizations have a	<del></del>	-	
3	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard	3		
Sec	tion E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the yea(see instruction)	ons):		
а	The organization satisfied the Activities Test. Complete line 2 below			
b	The organization is the parent of each of its supported organizations. Complete line 3 below			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (se	e instructions		1
2	Activities Test. Answer (a) and (b) below.		Yes	N
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI Identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,		1	
		II	1	1
	how the organization was responsive to those supported organizations, and how the organization determined	0-		1
	how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities	2a		-
b	how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities  Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more	2a		
b	how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities  Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the	2a		
b	how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities  Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these			
	how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities  Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	2a 2b		
3	how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities  Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.  Parent of Supported Organizations Answer (a) and (b) below.			
	how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities  Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.  Parent of Supported Organizations Answer (a) and (b) below.  Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	2b		
3 a	how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities  Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.  Parent of Supported Organizations Answer (a) and (b) below.  Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.			
3 a	how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities  Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.  Parent of Supported Organizations Answer (a) and (b) below.  Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or	2b		

#### The Church of Jesus Christ of Latter-Day

	edule A (Form 990 or 990 EZ) 2015 Saints, Chicago First W			45-6721810 Page 6
Ра	rt V Type III Non-Functionally Integrated 509(a)(3) Supportin			
1	Check here if the organization satisfied the Integral Part Test as a qualifying			structions. All
	other Type III non-functionally integrated supporting organizations must co	omplete S	Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
_1_	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
_3_	Other gross income (see instructions)	_ 3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year).	1		
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
	Discount claimed for blockage or other		<del></del>	
	factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
	see instructions)	4		ļ
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2	<del> </del>	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to	1		
-	emergency temporary reduction (see instructions)	6		
7	Check here if the current year is the organization's first as a non-functional		ted Type III supporting	organization (see
	instructions).		,, ,, ,,	· .

Schedule A (Form 990 or 990-EZ) 2015

The Church of Jesus Christ of Latter-Day

	dule A (Form 990 or 990 EZ) 2015 Saints, Chica  † V   Type III Non-Functionally Integrated 509			15-6721810 Page 7
	t V Type III Non-Functionally Integrated 509	(a)(s) Supporting Orga	anizations (continuea)	Current Veer
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		Current Year
	Amounts paid to supported organizations to accomplish exemples and to perform activity that directly furthers exemple the supported organizations to accomplish exemples and the supported organizations to accomplish exemples and the supported organizations to accomplish exemples and the supported organizations to accomplish exemples and the supported organizations to accomplish exemples and the supported organizations to accomplish exemples and the supported organizations to accomplish exemples and the supported organizations to accomplish exemples and the supported organizations to accomplish exemples and the supported organizations are supported organizations.			
2	organizations, in excess of income from activity	or purposes or supported		
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	ie	
4	Amounts paid to acquire exempt-use assets	es of supported organization		
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			<del>                                     </del>
7	Total annual distributions. Add lines 1 through 6.			<del> </del>
8	Distributions to attentive supported organizations to which the	he organization is responsive		
	(provide details in Part VI). See instructions	no organization to respondit	•	
9	Distributable amount for 2015 from Section C, line 6			
10	Line 8 amount divided by Line 9 amount			
		(i)	(ii)	(111)
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions Pre-2015	Distributable Amount for 2015
1	Distributable amount for 2015 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2015			
	(reasonable cause required see instructions)			ĺ
3	Excess distributions carryover, if any, to 2015:			
а				
b				
С				
d	From 2013			
е	From 2014			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2015 distributable amount			
<u>_i</u>	Carryover from 2010 not applied (see instructions)			
_i_	Remainder Subtract lines 3g, 3h, and 3i from 3f.			<u> </u>
4	Distributions for 2015 from Section D,			
	line 7: \$			
a	Applied to underdistributions of prior years		<u></u>	
b	Applied to 2015 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.		<del>_</del>	
5	Remaining underdistributions for years prior to 2015, if			
	any. Subtract lines 3g and 4a from line 2 (if amount			
	greater than zero, see instructions).			
6	Remaining underdistributions for 2015. Subtract lines 3h			
	and 4b from line 1 (if amount greater than zero, see			
	instructions).			<del> </del>
7	Excess distributions carryover to 2016. Add lines 3j			
	and 4c			<del></del>
8_	Breakdown of line 7:			
_ <u>a</u>				<del></del>
<u>b</u>	Evenes from 2012	<u> </u>		-
	Excess from 2014			
	Excess from 2014			
е	Excess from 2015			1

Schedule A (Form 990 or 990-EZ) 2015

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## Grants and Other Assistance to Organizations. The Church Name of the organization Department of the Treasury Internal Revenue Service SCHEDULE I (Form 990)

OMB No 1545-0047

**2** 

X Yes

Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

criteria used to award the grants or assistance?

Part

Part

Complete of the Organization and INAs on Form DO Hart IV or 22	Governments, and Individuals in the United States
--	---

Schedule I (Form 990) (2015) (h) Purpose of grant or assistance (g) Description of non-cash assistance (f) Method of valuation (book, FMV, appraisal, other) Ö Ö ö (e) Amount of non-cash assistance recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (d) Amount of cash grant 100001 24500 7500 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table (c) IRC section if applicable LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 501 (c) (3) 501 (c) (3) 501 (c) (3) Enter total number of other organizations listed in the line 1 table 23-7300405 36-2264416 36-4381962 (p) EIN Temple Street - Salt Lake City, UT 1 (a) Name and address of organization Latter-Day Saints - 50 East North The Church of Jesus Christ of or government 4939 West Montrose Ave St. John's Food Pantry 7649 North Paulina St Chicago, IL 60626 Chicago IL 60641 A Just Harvest 84150

Page 2

45-6721810

Schedule I (Form 990) (2015)

Saints, Chicago First Ward Trust

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash ássistance
Tuition Assistance	2	5928	0		•
Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.	quired in Part I, lir	e 2, Part III, column	(b), and any other a	dditional information.	
candidates petition the distribution	•	ttee and t	committee and then the committee	mmittee	
determins need or availability.	i i				

Schedule I (Form 990) (2015)

#### SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

#### Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

➤ Attach to Form 990 or 990-EZ. Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. OMB No. 1545-0047 Open to Public Inspection

The Church of Jesus Christ of Latter-Day Name of the organization Employer identification number Saints, Chicago First Ward Trust 45-6721810 I, Line 1, Description of Organization Mission: activities Form 990, Part VI, Section A, line 8b: only one committee exists thus all members of the distibution committee have same rights. Form 990, Part VI, Section B, line 11: via electronic copy Form 990, Part VI, Section C, Line 19: Distibuted a copy of the trust document to the supporting organizations